

## KANSAS SECRETARY OF STATE Series Limited Liability Company Articles of Organization Instructions

**Kansas Office of the Secretary of State:** 

Memorial Hall, 1st Floor 120 S.W. 10th Avenue Topeka, KS 66612-1594 (785) 296-4564 kssos@sos.ks.gov www.sos.ks.gov The following form **must be complete** and accompanied by **the correct filing fee** or the document will **not** be accepted for filing.

Save time and money by filing your forms online at **www.sos.ks.gov**. There, you can also stay up-to-date on your organization's status, annual report due date, and contact addresses.

	Filing fee	The filing fee for this document is \$250. For more information, please call (785) 296-4564.
	Payment	Please enclose a check or money order payable to the Secretary of State. Forms received without the appropriate fee will not be accepted for filing. Please do not send cash. <b>NOTICE:</b> There is a \$25 service fee for all checks returned by your financial institution. Also, to expedite processing, please do not use staples on your documents or to attach checks.
	Name	The LLC name must contain the words Limited Liability Company, L.L.C. or LLC, and cannot contain the terms Corporation, Corp., Incorporated, Inc., Ltd., Co., Limited Partnership, or L.P.
wasteland amount		This address is required to be maintained in the jurisdiction of its organization or, if not required, of the principal place of business. A P.O. box or c/o is unacceptable.
	Additional information	If additional space is needed, please provide an attachment.

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## KANSAS SECRETARY OF STATE **Series Limited Liability Company Articles of Organization**

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THIS SPACE FOR OFFICE USE ONLY.

Onii	me at www.sos.ks.gov.			THI	S SPACE FOR OFFICE USE ONLY.				
1.	Company name								
2.	2. Mailing address Street Address								
		City		State	Zip	Country			
3.	Articles of organization effective on:								
4.	Resident agent name and address	Name							
	Must be a street, rural route, or highway. A P.O. box is unacceptable.	Address							
		City		State	Zip	Country			
	LCD, Certificate of Design to have limited liability, respect to a particular sonly, and not against the debts, liabilities, obl	gnation. When the the debts, liabilition eries of the limited e assets of the limited igations, and exp	sas Secretary of State pri company has filed a cert es, and obligations incurr d liability company are er nited liability company ge enses incurred, contracte other series thereof shal	tificate of desi ed, contracted forceable aga nerally or any ed for, or other	gnation for each series d for, or otherwise exist linst the assets of such other series thereof: a rwise existing with resp	ting with series on the series of the section to the section that section the sec			
6.	This limited liability company								
LĽ.	is managed by the manager(s	). 🔲 nas manaç	gement vested in the member(s).						
6a.	Name(s) and address(es)	Name		Address					
	If additional space is needed, please provide attachment.	City		State	Zip	Country			
		Name		Address	ess				
		City		State	Zip	Country			
		Name		Address	Address				
		City		State	Zip	Country			

. I declare under penalty of perjury pursuant to the laws of the state of Kansas that the foregoing is true and correct and that I have remitted the required fee.						
Signature of Organizer X		Month Day	Year			
Name of Signer (printed or typed)	Title/Position	Phone Number				
Address	City	State	Zip			
Signature of Organizer X		Month Day	Year			
Name of Signer (printed or typed)	Title/Position	Phone Number				
Address	City	State	Zip			